



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Art Unit: 2182

William C. DeLeeuw

Examiner: Alan S. Chen

Appl. No. 10/813,063

Atty. Docket No. 42339-199426

Confirmation No. 5261

Customer No.  
26694  
PATENT TRADEMARK OFFICE

Filed: March 31, 2004

Last Office Action: April 27, 2007

For: MULTI-INTERFACING IN A  
RECONFIGURABLE SYSTEM

**Amendment**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated April 27, 2007, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin at page 7 of this paper.



PTO/SB/21 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|  |                        |                        |
|--|------------------------|------------------------|
|  | Application Number     | 10/813,063-Conf. #5261 |
|  | Filing Date            | March 31, 2004         |
|  | First Named Inventor   | William C. DeLeeuw     |
|  | Art Unit               | 2182                   |
|  | Examiner Name          | A. S. Chen             |
|  | Attorney Docket Number | 42339-199426           |

### ENCLOSURES (Check all that apply)

|   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                  | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> After Allowance Communication to TC                            |
| <input type="checkbox"/> Fee Attached                                     | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input type="checkbox"/> Amendment/Reply                                  | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final                                      | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)                        | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request                        | <input type="checkbox"/> Terminal Disclaimer  | <input type="checkbox"/> Other Enclosure(s) (please identify below):                    |
| <input type="checkbox"/> Express Abandonment Request                      | <input type="checkbox"/> Request for Refund   |   |
| <input type="checkbox"/> Information Disclosure Statement                 | <input type="checkbox"/> CD, Number of CD(s) _____                                      |   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)           | <input type="checkbox"/> Landscape Table on CD  |   |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application   | Remarks   |   |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |                                       |          |                 |
|--------------|---------------------------------------|----------|-----------------|
| Firm Name    | VENABLE LLP                           |          |                 |
| Signature    |                                       |          |                 |
| Printed name | James R. Burdett / Marina V. Zalevsky |          |                 |
| Date         | 7/26/07                               | Reg. No. | 31,594 / 53,825 |



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2007

Applicant claims small entity status. See 37 CFR 1.27

|                         |      |      |                     |              |
|-------------------------|------|------|---------------------|--------------|
| TOTAL AMOUNT OF PAYMENT | (\$) | 0.00 | Attorney Docket No. | 42339-199426 |
|-------------------------|------|------|---------------------|--------------|

**Complete if Known**

|                      |                        |
|----------------------|------------------------|
| Application Number   | 10/813,063-Conf. #5261 |
| Filing Date          | March 31, 2004         |
| First Named Inventor | William C. DeLeeuw     |
| Examiner Name        | A. S. Chen             |
| Art Unit             | 2182                   |

**METHOD OF PAYMENT** (check all that apply)

|   |                                      |                                      |                               |   |
|---|--------------------------------------|--------------------------------------|-------------------------------|---|
| <input type="checkbox"/> Check                      | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____ |
| <input checked="" type="checkbox"/> Deposit Account | Deposit Account Number: 22-0261      |                                      |                               | Deposit Account Name: Venable LLP                       |

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

|  |   |
|--|---|
| <input type="checkbox"/> Charge fee(s) indicated below   | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <u>Application Type</u> | <u>FILING FEES</u> |                              | <u>SEARCH FEES</u> |                              | <u>EXAMINATION FEES</u> |                              | <u>Fees Paid (\$)</u> |
|-------------------------|--------------------|------------------------------|--------------------|------------------------------|-------------------------|------------------------------|-----------------------|
|                         | <u>Fee (\$)</u>    | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u>    | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u>         | <u>Small Entity Fee (\$)</u> |                       |
| Utility                 | 300                | 150                          | 500                | 250                          | 200                     | 100                          |                       |
| Design                  | 200                | 100                          | 100                | 50                           | 130                     | 65                           |                       |
| Plant                   | 200                | 100                          | 300                | 150                          | 160                     | 80                           |                       |
| Reissue                 | 300                | 150                          | 500                | 250                          | 600                     | 300                          |                       |
| Provisional             | 200                | 100                          | 0                  | 0                            | 0                       | 0                            |                       |

**2. EXCESS CLAIM FEES**Fee Description

Each claim over 20 (including Reissues)

|                              |                 |
|------------------------------|-----------------|
| <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u> |
|------------------------------|-----------------|

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

|                     |                     |                 |                      |                                  |
|---------------------|---------------------|-----------------|----------------------|----------------------------------|
| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> |
| - =                 | x                   | =               |                      | <u>Fee (\$)</u>                  |

HP = highest number of total claims paid for, if greater than 20.

|                      |                     |                 |                      |                 |                      |
|----------------------|---------------------|-----------------|----------------------|-----------------|----------------------|
| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
| - =                  | x                   | =               |                      |                 |                      |

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |                     |   |                 |                      |
|---------------------|---------------------|---|-----------------|----------------------|
| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
| - 100 =             | /50 =               | (round up to a whole number) x                          | =               |                      |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

**SUBMITTED BY**

|                   |                                       |                                      |                 |                          |
|-------------------|---------------------------------------|--------------------------------------|-----------------|--------------------------|
| Signature         |                                       | Registration No.<br>(Attorney/Agent) | 31,594 / 53,825 | Telephone (202) 344-4893 |
| Name (Print/Type) | James R. Burdett / Marina V. Zalevsky |                                      | Date 7/26/07    |                          |